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RICHARD W. WICKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

RAMON JERMAINE SAPP Plaintiff,

vs.

SAN FRANCISCO POLICE DEPT.
DEPT. 38 Defendant.

CASE NO. 08 1803

PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

(PR)

I, RAMON J. SAPP, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ☐ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 _____
 5 _____
 6 _____

7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

- 9 a. Business, Profession or Yes ____ No X
 10 self employment
 11 b. Income from stocks, bonds, Yes ____ No X
 12 or royalties?
 13 c. Rent payments? Yes ____ No X
 14 d. Pensions, annuities, or Yes ____ No X
 15 life insurance payments?
 16 e. Federal or State welfare payments, Yes ____ No X
 17 Social Security or other govern-
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 _____
 22 _____

23 3. Are you married? Yes ____ No X

24 Spouse's Full Name: _____ N/A

25 Spouse's Place of Employment: _____ N/A

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ _____ N/A Net \$ _____ N/A

28 4. a. List amount you contribute to your spouse's support:\$ _____

1 b. List the persons other than your spouse who are dependent upon you for
 2 support and indicate how much you contribute toward their support. (NOTE:
 3 For minor children, list only their initials and ages. DO NOT INCLUDE
 4 THEIR NAMES.).

5 _____

6 _____

7 5. Do you own or are you buying a home? Yes ____ No X

8 Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

9 6. Do you own an automobile? Yes ____ No X

10 Make _____ Year _____ Model _____

11 Is it financed? Yes ____ No ____ If so, Total due: \$ _____

12 Monthly Payment: \$ _____

13 7. Do you have a bank account? Yes ____ No X (Do not include account numbers.)

14 Name(s) and address(es) of bank: _____

15 _____

16 Present balance(s): \$ _____

17 Do you own any cash? Yes ____ No X Amount: \$ _____

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
 19 market value.) Yes ____ No X

20 _____

21 8. What are your monthly expenses? NONE

22 Rent: \$ _____ Utilities: _____

23 Food: \$ _____ Clothing: _____

24 Charge Accounts: NONE

25 Name of Account Monthly Payment Total Owed on This Acct.

26 _____ \$ _____ \$ _____

27 _____ \$ _____ \$ _____

28 _____ \$ _____ \$ _____

1 9. Do you have any other debts? (List current obligations, indicating amounts and to
2 whom they are payable. Do not include account numbers.)

3 N/A
4

5 10. Does the complaint which you are seeking to file raise claims that have been presented
6 in other lawsuits? Yes ___ No X

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8 which they were filed.
9
10

11 I consent to prison officials withdrawing from my trust account and paying to the court
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and
14 understand that a false statement herein may result in the dismissal of my claims.
15

16 APRIL 17, 2008

17 DATE

18 X 
19
20
21
22
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26
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28
SIGNATURE OF APPLICANT

Case Number: CV-08-1903

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Ramon Jermaine Sapp for the last six months

VICTORVILLE USP ^[prisoner name] where (s)he is confined.
_[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 260.00 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 250.00

Dated: X

4/21/08

X

[Signature]
[Authorized officer of the institution]

SUBSCRIBED AND SWORN BEFORE ME
THIS 21st DAY April 20 08
FEDERAL CORRECTIONAL COMPLEX, VICTORVILLE, CA
SAN BERNARDINO COUNTY
[Signature]
CASE MANAGER
AUTHORIZED BY ACT OF CONGRESS JULY 7, 1955
TO ADMINISTER OATHS
(TITLE 18, U.S.C. SECTION 4004)